044624-15-CIP

Paul Turgeon

PTO/SB/01 (03-01)

COMPLETE IF KNOWN

10/086,793

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Attorney Docket Number

First Named Inventor

Application Number

OT PECLARATION FOR UTILITY OR

UN 1 1 2002

DESIGN

PATENT APPLICATION

(37 CFR 1.63)

Declaration V	Declaration	Filing Date	March	1, 260 PY OF	PAPERS		
RADEMAN Submitted OR with Initial	Submitted after Initial Filing (surcharge	Group Art Unit	2161	UNIGIRA	TANAL SE		
Filing	(37 CFR 1.16 (e)) required)	Examiner Name		The Control of the Co			
As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
System and Method for Performing Secure Remote Real-Time Financial Transactions Over a Public Communications Infastructure with Strong Authentication							
(Title of the Invention)							
the specification of which	(, , , , o , , , , , , , , , , , , , ,	````					
is attached hereto							
OR							
was filed on (MM/DD/YYYY) March 1, 2002 as United States Application Number or PCT International							
Application Number 10/086,793 and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the cuty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	y Attached? NO		

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto



COPY OF PAPERS ORIGINALLY FILED

ORIGINALLY FILED

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Num or Bar Code La	. 1	24964		OR Cor	rrespondence address below
Name Alison Kessler, Esq.					
Name / Moon 1 (300)				***************************************	
Address 7 Becker Farm Road					p
city Roseland			State	NJ	ZIP 07068
Country US			992-1990		Fax (973)992-4643
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :	A	petition h	ias be	en filed for this un	signed inventor
Given Name (first and middle [if any]) Paral Family Name or Surname Turgeon					
Inventor's Signature Date 4/9/02					Date 4/9/02
Residence: City Fort Collins	Sta	ite CE	>	Country () SA	Citizenship USA
Mailing Address 90/ SAIJONS Reet					
city FONT COLLIDS	Sta	ite O	>	zip <i>8058</i> 5	Country USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					gned inventor
Given Name (first and middle [if any]) Family Name or Surname					
Inventor's Signature Date					
Signature	\neg		\Box		
Residence: City	State	•	С	ountry	Citizenship
Mailing Address					
City	State	ne .	z	'iP	Country
Additional inventors are being named on the	1,		onal Inv	entor(s) sheet(s) PTO	SB/02A attached hereto

Please type a plus sign ((+) inside this box	>	+
	• •		

COPY OF PAPERS ORIGINALLY FILED

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number 10/086,793 **Application Number** March 1, 2002 Filing Date Paul Turgeon First Named Inventor POWER OF ATTORNEY OR Title System and Method for Reform... **Group Art Unit Examiner Name** Attorney Docket Number 044624-15-CIP

I hereby appoint:						
₽ Pra	actitioners at 0	Customer Number 24694	24 Per Code			
OR PATENT THAT BEING ROFFICE						
Pra	ectitioner(s) na	Name	Registration Number			
		iname :	registration Number			
	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Please ch	ange the corre	espondence address for the above-ide	entified application to:			
	above-mentior	ned Customer Number.				
OR □ Pract	titioners at Cus	stomer Number	Place Customer , Number Bar Code			
OR	and note of our	steme, rrameer	Label here			
Firm						
Address	dual Name					
Address						
City			State Zip			
Country						
Telephone			Fax			
I am the:						
l E Ar	✓ Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
\$IGNATURE of Applicant or Assignee of Record						
Double Turgedon 10th And						
Name dulhan a s						
Signature SULL WIX 11/7						
NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						
forms if more th	nan one signature	is required, see below*				
☐ *Total offorms are submitted.						

Burden Hour Statement. This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.